

Condition 7 of service company registrations requires the notification of any sale, lease, transfer, loan, disposal, assembly, or installation of radiation machines in the state. The enclosed DRC-23 form (Report of Assembly of a Radiation Source), the FDA 2579 form, or any document that meets LAC 33:XV.211.A can be submitted to fulfill this requirement.

Report of Assembly of a Radiation Source

DRC-23 (12/2019)



Date of Transfer: _____

Assembler Information:

| | | | |
|----------------------------|--------------|--|--|
| Company Name/Facility Name | | Agency Interest No./Registration No. (if known): | |
| Street Address | City & State | Zip Code | |

Equipment Location:

| | | | |
|----------------------------|--------------|--|--|
| Company Name/Facility Name | | Agency Interest No./Registration No. (if known): | |
| Contact Person | | Phone Number | |
| Street Address | City & State | Zip Code | |

Control Panel Information: *Use only information from the Control Panel*

| a. Manufacturer | b. Model Number | c. Serial Number |
|-----------------|-----------------|------------------|
| | | |
| | | |

Type of Installation

☐ New Installation* ☐ Part Change/Reassembly ☐ Disposition*

☐ *DRC-6 Form (Application for Registration of Radiation Source) was/will be submitted to LDEQ by facility

Type of Source:

☐ Fixed ☐ Mobile ☐ Handheld

A. Medical X-Ray

- ☐ Fluoroscopic w/ Image Intensifier
- ☐ Fluoroscopic w/o Image Intensifier
- ☐ Combination *w/ Image Intensifier
- ☐ Combination *w/o Image Intensifier
- ☐ Radiographic
- ☐ Photofluorographic
- ☐ Mammography
- ☐ CT
- ☐ Bone Densitometer

*Radiographic & Fluoroscopic Combination

B. Dental X-Ray

- ☐ Deep Therapy
- ☐ Superficial Therapy
- ☐ Special Procedures
- ☐ Angiography
- ☐ Podiatry

B. Dental X-Ray

- ☐ Conventional
- ☐ Panoramic
- ☐ Cephalometric
- ☐ CBCT

C. Accelerator

- ☐ Neutron Generator
- ☐ Van de Graaff
- ☐ Linear Accelerator

D. Other X-Ray

- ☐ Industrial Radiography
- ☐ Diffraction Apparatus
- ☐ Cabinet
- ☐ Other (Specify): _____

E. Educational Institution

- ☐ Medical X-Ray
- ☐ Dental X-Ray
- ☐ Other X-Ray

F. Veterinary

- ☐ Radiographic
- ☐ Dental

Assembler Certification:

All radiation machines and the supplies used in connection with such machines, when properly placed in operation and used, meet the requirements of LAC 33:XV. This is to certify that, to the best of my knowledge and belief, all information contained herein is true and correct.

Date

Printed Name

Signature of Responsible Party

